



www.film.ri.gov

One Capitol Hill, 3rd Floor – Providence, RI 02908 – 401/222-3456 – 401/222-3018 Fax
Steven Feinberg, Executive Director

RHODE ISLAND FILM & TV MOTION PICTURE PRODUCTION TAX CREDIT

INITIAL APPLICATION

[Identification Number (Office Use Only) _____]

Feature Film TV Movie/Pilot TV Series Commercial Music Video

Documentary Theatrical Production Other

(please check one)

Name and Mailing Address of Production Company:

Name

Address

City

State

Zip Code

Country

Contact Person

Title

Telephone Number

Production Company's Rhode Island Domiciled Address:

Address

City

Zip Code

Effective Date

Name of Production: _____

Federal Taxpayer Identification Number: _____

Rhode Island Banking Institution:

Name

Address

City

Zip Code

Contact Person

Title

Telephone Number

Location of Soundstage, if applicable:

Address

City

State

Zip Code

Country

Brief Background of Company/Companies Involved in Production: _____

Brief Story Synopsis: _____

Anticipated Total Rhode Island Production Budget: _____

Anticipated Principal Photography Start Date: _____

Anticipated Principal Photography Completion Date: _____

Anticipated number of principal and ongoing photography days in Rhode Island or, for live theatrical productions, length of theatrical run: _____

Anticipated number of photography days outside of Rhode Island: _____

Anticipated Amount of Motion Picture Tax Credit: _____

“ABOVE THE LINE” PERSONNEL

Name: _____

Credits: _____

Name: _____

Credits: _____

Name: _____

Credits: _____

INTERNSHIPS

Briefly describe or attach additional information on your plans to participate in internship programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry:

Anticipated Number of Interns: _____

TRAINING PROGRAMS

Briefly describe or attach additional information on your plans to participate in training programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry:

Anticipated Number of Training Program Participants: _____

DIVERSITY PROGRAMS

Briefly describe or attach additional information on your plan to participate in diversity programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry designed to promote and encourage training and hiring of Rhode Island residents who represent the diversity of the Rhode Island population:

Anticipated Number of Minorities Hired: _____

Anticipated Total Number of Rhode Island Residents Hired: _____

REQUIRED DOCUMENTATION (PLEASE ATTACH)

- Rhode Island Secretary of State Articles of Corporation
- Certificate of Disclosure of Corporation
- Screenplay
- Viable Distribution Letter of Intent
- Anticipated calendar of days each "above the line" personnel (i.e.; Director, Producers, Writers and Featured Actors) will arrive, perform work in and depart Rhode Island
- Budget
- Impact Analysis Statement (*example under All Forms at www.film.ri.gov*)
- Page One of the Motion Picture Tax Credit Information Form

Before commencement of principal photography:

- Certificate of Insurance
- Crew List
- List of Locations/Shooting Schedule
- Daily Call Sheets
- Copy of Business Application and Registration (BAR) Form submitted to the RI Division of Taxation
- Coordinate a joint Press Release with the Rhode Island Film & TV Office

By signing below, I/we understand that, along with this completed document and required documentation, in compliance with the Rules and Regulations, I/we must provide screen credit to the Rhode Island Film & Television Office using the exact language and logo as follows:

***With grateful acknowledgement to the State of Rhode Island and
Steven Feinberg, the Rhode Island Film & Television Office***



www.film.ri.gov

The Rules and Regulations definition of screen credit is as follows: "Screen Credit' means a Motion Picture company engaged in a State Certified Production shall accord the State of Rhode Island, The Rhode Island Film & Television Office, along with the approved name and title of the Film Office Director, at the Film Office Director's sole discretion, a credit on screen "With grateful acknowledgement to" in the end titles of the Motion Picture with all other characteristics (including, without limitation, size, form, placement and duration) of such credit that equal to end credit of principal actor."

I/we also understand that I/we must provide the Rhode Island Film & Television Office two (2) DVD's of the finished production (theatrical productions exempt).

Under penalty of perjury, I/we declare that I/we have examined this form, including any accompanying documents and information, and to the best of my/our knowledge, the information and statements are correct and complete. I understand that providing false or misleading information is a violation of law and may subject me/us to legal penalties.

Production Company: _____

Signature of Authorized Agent

Print Name of Authorized Agent

Title of Authorized Agent

Date

IMPORTANT NOTE: *If an Applicant believes that certain information submitted as part of its application is exempt from public disclosure, such information should be marked "Exempt from Public Disclosure" and referenced RIGL §38-2-2(4)(B).*

Please send completed Initial Application and documentation to:

Steven Feinberg, Executive Director
Rhode Island Film & Television Office
One Capitol Hill, 3rd Floor
Providence, RI 02908

